



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
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THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
EBISUI	LYNNE	S.	535-5934
MAILING ADDRESS (Street)			FAX
745 FORT STREET, SUITE 1800			535-5944
(City)	(State)	(Zip Code)	
HONOLULU	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
THE GAS COMPANY, LLC		535-5900
MAILING ADDRESS (Street)		FAX
745 FORT STREET, SUITE 1800		535-5944
(City)	(State)	(Zip Code)
HONOLULU	HI	96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
LYNNE S. EBISUI		535-5934
MAILING ADDRESS (Street)		FAX
745 FORT STREET, SUITE 1800		535-5944
(City)	(State)	(Zip Code)
HONOLULU	HI	96813

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Lyne S. Glavin

(Signature of Lobbyist)

Jan. 5, 2007

(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
JIM R. YATES		PRESIDENT & CHIEF EXECUTIVE OFFICER	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
THE GAS COMPANY, LLC		535-5900	
MAILING ADDRESS (Street)		FAX	
745 FORT STREET, SUITE 1800		535-5944	
(City)	(State)	(Zip Code)	
HONOLULU	HI	96813	
<i>I hereby authorize the above named person to engage in lobbying activities on behalf of the undersigned.</i>			
<u><i>[Signature]</i></u>		<u>1/7/07</u>	
(Signature of Authorizing Officer or Person Represented)		(Date)	